PTOFSB08 (08-03)
Approved for use through 7/31/2008, OXS 0851-0032
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Acceptable of Policy Substitute for Form PTO-875 Acceptable of Policy Substitute for Form PTO-875]
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
FOR		MUM	MULIBER FOLED		MANGER EXTRA		RATE	FEE]	RATE	FEE] /
D7 CFF	FEE ? 1.15(a))							3	OR		1	
TOTAL O	CLADAS LIS(c))		minus 20 c				x 3		OR.	x s		1
INDEPENDENT CLAMS OF CFR LIED))		MS	minus 1			1	X 5		OR	X		1
MULTIPLE DEPENDENT CLADA PRESENT (27 CFR 1.58(d))						1	+,		OR	1		1
" If the difference in column 1 is less than zero, enter "O" in column 2.						•	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II												
1-24-05 (Column 1) (Column 2) (Column 3)						_	SMALL	NTITY	OR		R THAN ENTITY	
A TN		CLAMS REMAINING AFTER AMENOMENT		HIGHEST HUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
2 4	Total FCFR 1, with	30	Minus	23	7		X 5		OR.	X 5]
MENOMENT	dependent r cirk v.signg	. 2	Mines	··· 4			x s =		OR	x s•		1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR 1.16(0))						+5		OR	+5•]
							TOTAL ADDL FEE		OR ·	TOTAL ADD'L FEE		
10-	14-0	(Column 1)		(Column 2)	(Column 3)				1			l
ENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RAYE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
71	Total ora useca	65	Minus	⁻ 30	.35		x s=		OR	x : 50 .	1750]
N S	dependent CFR 1.1403	5	Minus	·· 3	. 3	H	x s =		QR	x 3400	400	
AM L	FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.19(4))						+5		OR	+5		
35,34,38,39,55,							ADD'S FEE		QR	ADD'L FEE	2150	Pd
7	5/01	(Column 1)		(Column 2)	(Column 3)							
NTC		CLAMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N P	Total CPR UNIO	.62	Minus	<u>" 65</u>	.0		x s•		OR	x \$	0	
MENDMENT	Pependarii CER 1,1400	. 5	Minus	<u>" 5</u>	. 🛇		x s•		OR	x \$	0	
	FRIST PRESENTATION OF MULTIPLE DEPONDENT CLAIM (27 CFR 1,18(4))						+5		CPR	+ 1 .		J
TOTAL TOTAL ADDITEE OR ADDITEE											1]
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time still vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chall information Officer, U.S. Paterni and Tratemath Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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